

The Enlightenment of a Counseling Case for Mental Health Education among Graduate Students

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Abstract

Psychological crisis intervention is a critical aspect of mental health education. A case study is present on the psychological crisis resulting from academic pressure among graduate students and the use of the Satir model is proposed for crisis intervention. Additionally, there are recommended to strengthen life and frustration education for graduate students, emphasize the importance of training graduate tutors in mental health knowledge and skills, assist graduate students in improving their mental resilience, and enhance their interpersonal skills.

Keywords: psychological crisis intervention, academic pressure, graduate students' mental health education

1. Introduction

Recently, there has been a significant increase in the enrollment of graduate students, leading to heightened focus on the physical and mental well-being of this student population by both the state and universities. Graduate students differ from undergraduates in terms of age, learning lifestyle, interpersonal relationships, and pressure. Research indicates that 44.16% of graduate students exhibit signs of mental health issues, with 11.99% experiencing moderate to severe problems (Ma & Li, 2011). Therefore, the mental health problems of graduate students deserve special attention. The "Satir Model" was proposed by Virginia Satir, an American family psychotherapist. She believed that each person is unique and valuable, and has both internal and external positive resources that can be used to help oneself grow. People not only live in an external system but also exist in an internal system, which she referred to as the "iceberg". The various levels of a person's internal iceberg are an organic and interconnected system, and each level will affect other levels and even the entire iceberg. When people cope with the outside world, all levels of the iceberg will undergo changes (Lin, 2014). In this case, the Satir Model was used to intervene in the psychological crisis caused by academic pressure in graduate students, helping them overcome academic difficulties and proposing practical measures for graduate student mental health education.

1.1 General Information

Psychological crises resulting from academic pressure can have detrimental effects on a graduate student's safety, academic performance, and personal life. The counselor utilizes the Satir model to assist the client in overcoming the psychological crisis, managing negative emotions, adjusting irrational thoughts, developing interpersonal skills, and improving self-esteem.

1.1.1 Demographic Details

Chen, a 23-year-old male, is a first-year graduate student who is unmarried.

1.1.2 Personal Background

Chen hails from a town in Hainan Province. His father worked as a civil servant, while his mother was a primary school teacher. As the only child in the family, Chen was exposed to his parents' tumultuous relationship, which was characterized by frequent conflicts and arguments. His father was prone to violent outbursts, which included throwing objects, slamming doors, and even physically assaulting Chen's mother. As a result, Chen constantly worried about his parents' arguments, which left him feeling insecure and afraid. He became socially withdrawn, avoiding contact with others and becoming estranged from his teachers and classmates.

2. Main and Personal Statements

As a graduate student, Chen spent his days conducting experiments in the laboratory. Despite nearly a year of

intense work, he had made little progress, and his supervisor had expressed doubts about his abilities. Fearing that he would not graduate successfully and would be unable to face his parents, Chen became overwhelmed with a sense of hopelessness. He turned to an excessive amount of psychotropic drugs, which were discovered by his concerned classmates, who promptly took him to the hospital. After receiving life-saving treatment, Chen was diagnosed with major depression and referred to the psychiatric department of the local general hospital, where he received stable medication.

3. Psychological Assessment and Diagnosis

3.1 Initial Evaluation

A psychological crisis stemming from academic pressure

3.2 Assessment Basis

The client experienced a crisis related to academic pressure and was subsequently diagnosed with major depressive disorder by the hospital. Treatment with medication stabilized their emotions, but they continued to exhibit impaired social functioning, indicating the need for ongoing drug treatment and psychological counseling support.

4. Case Conceptualization

Upon entering graduate school, the client encountered high levels of academic pressure and faced frequent criticism from his supervisor due to unsatisfactory progress in scientific research. This resulted in pronounced stress reactions, including excessive mental tension, notable anxiety, and depression, as well as mild insomnia symptoms. The client developed irrational thoughts and beliefs, fearing that his research setbacks would hinder his graduation, impede his job prospects, and cause embarrassment to his family and friends. Overwhelmed by stress, he refrained from communicating with teachers and classmates, opting to endure the pressure in solitude. Consequently, he experienced profound inner anguish, helplessness, and even despair, culminating in suicidal impulses.

It is not the intention of a person to choose death as a means of coping with suffering (Lin, 2014). According to the “Iceberg” theory of the Satir Model (Satir & Banmen, 2007), the client’s inner turmoil stemmed from unfulfilled desires, such as the need for recognition, affirmation, and respect from his teacher, which were rooted in his childhood experiences. During his youth, the client’s parents frequently quarreled, and his father exhibited violent behavior, leading to the client’s accumulation of fear and insecurity, as well as a lack of recognition and respect. Consequently, he adopted a facade of coping mechanisms, hoping to be understood, accepted, affirmed, respected, and cared for by others. However, during graduate school, due to his supervisor’s failure to acknowledge his scientific research, the client experienced significant inner turmoil and irrational thinking, disregarding his positive attributes and denying his sense of self-worth. As a result, he lost confidence and hope in life.

5. Consulting Plan

5.1 Theoretical Basis

The Satir Model is a theoretical framework developed by Virginia Satir, a renowned family therapist. The primary objective of Satir’s psychological treatment model is to enhance the client’s self-esteem, integrate their internal and external resources, facilitate decision-making, promote a sense of responsibility for their behavior, foster consistent communication between their inner and outer selves, and ultimately achieve “physical and mental integration, internal and external consistency” (Satir & Banmen, 2007).

5.2 Consulting Goal Setting

Short-term goal: To assist clients in overcoming psychological crises, stabilizing their psychological state, expressing negative emotions, and restoring their confidence and hope.

Medium-term goal: To modify irrational thinking patterns, facilitate adjustment to academic life, teach effective communication skills, and enhance interpersonal relationships.

Long-term goal: To improve self-esteem, foster self-acceptance, and promote harmony with oneself, others, and society.

5.3 Consulting Methods

Stabilization techniques, sculpting, empty chair techniques, and role-playing.

5.4 Others

Clients are informed of the role, significance, and limitations of psychological counseling, as well as their rights and obligations. The principle of confidentiality is emphasized, including exceptions to confidentiality. Counseling sessions are held once a week, lasting 50-60 minutes each. No fees are charged for counseling sessions in the school's psychological counseling room.

6. Consultation Process

In this case, a total of 20 psychological counseling sessions were conducted. The specific counseling process is outlined below:

6.1 Exploration Stage (1st-3rd consultations)

6.1.1 Presenting Issues

The client presented with several problems, including being induced into a psychological crisis due to academic pressure, taking excessive psychotropic drugs, and requiring hospitalization for treatment. Following hospitalization, the client was diagnosed with major depressive disorder by the psychiatric department of a general hospital. Subsequently, the client was referred to the psychological counseling center of the college for counseling.

6.1.2 Counseling Goals and Plans

The goals included establishing a counseling relationship, assisting the client in stabilizing emotions, eliminating suicidal thoughts, restoring hope, and establishing a positive life belief. The initial consultation plan involved scheduling one session per week.

6.1.3 Consultation Process

The initial steps involved informing the client of their rights and obligations, emphasizing the principle of confidentiality and its exceptions, collecting basic client information, and developing a consultation plan. Subsequently, the focus was on establishing a trusting, safe, and warm relationship with the client, fostering feelings of acceptance, understanding, recognition, and respect, and aiding the client in stabilizing emotions and restoring a sense of inner security. Additionally, the client was guided to recognize their own difficulties and pressures, as well as their avoidance coping model, and encouraged to adopt a new positive attitude to problem-solving, leading to a cessation of suicidal ideation, increased understanding of depression, and enhanced confidence and psychological strength.

6.1.4 Client's Progress

The client regained hope, found motivation for change, committed to adhering to the doctor's medication regimen, and expressed an expectation of improving self-awareness and learning attitude.

6.1.5 Homework Assignment

Engage in 30 minutes of daily exercise. Regular physical activity plays an effective role in regulating emotions, and the assigned exercise aims to improve the client's mood, reduce negative emotions, and increase positive emotions (Gong & Li, 2023).

6.2 Comprehension Stage (4th to 8th consultation)

6.2.1 Presenting Issues

The client adhered to the doctor's prescribed medication regimen and experienced temporary mood stability. However, during scientific research work, he exhibited concerns regarding negative evaluations from authority figures, over-assumed responsibility, and had difficulty communicating with others. Furthermore, when faced with work that exceeded his personal abilities, he experienced self-doubt and negative self-evaluation.

6.2.2 Counseling objectives and strategies

Investigated the underlying causes of the client's issues, delved into the "iceberg" model to understand the client's subconscious influences and the impact of their family of origin, facilitated psychological self-awareness, challenged irrational self-perceptions, and bolstered the client's self-esteem.

6.2.3 Counseling Process

Exploring the "iceberg" of the client: The client diligently pursued his study and experimental work as planned every day. However, after a year of hard work, the experiment failed, and the scientific research task remained incomplete. This perceived failure led to feelings of inadequacy and despair, with the client experiencing pain,

depression, and a sense of inferiority. Despite sustained efforts, he struggled to find results and hope, leading him to believe that learning and life was devoid of meaning, and leaving him feeling helpless and hopeless. He hesitated to communicate with his mentor or seek assistance from others, fearing judgment and the potential to burden them. He held the belief that his scientific research abilities were lacking, and that he was unrecognized by his tutor, resulting in a bleak outlook on his future.

The client held profound expectations and aspirations regarding his behaviors, emotions, and cognitions. He yearned for successful scientific research outcomes, recognition from his mentor, and a deep desire to be acknowledged, affirmed, respected, and accepted. During this time, the client's inner self was exceptionally fragile, as he struggled to recognize and accept himself, feeling unworthy and lacking a sense of purpose.

During times of stress, the client struggled to comprehend his own feelings, locate positive internal resources, and maintain self-belief. Additionally, he found it challenging to objectively assess his mentor's attitude and his own self-worth. Consequently, he adopted two coping mechanisms: flattery and self-blame. On one hand, he sought to gain recognition, affirmation, and confidence by flattering his tutor and those around him. On the other hand, he internalized feelings of failure, believing he could not find his place in society.

The inner "iceberg" of the client and his interpersonal relationships were significantly influenced by his original family. During his childhood, the client's parents frequently quarreled, with his father displaying violent behavior. This environment led the client to worry about potential conflicts at home on a daily basis, prompting him to frequently flatter his parents in an attempt to reduce family discord. Consequently, this dynamic resulted in an ambiguous and boundary-blurring relationship pattern for the client, characterized by a tendency to seek approval from others while also assuming excessive responsibility for them. As a result of these experiences, the client struggled to proactively engage with his supervisor or seek assistance from them and others when confronted with the pressures of scientific research.

6.2.4 Client's Progress

The client employed the iceberg theory to comprehend their behaviors, emotions, opinions, and expectations, and to establish a connection with their inner desires and self. By exploring their original family relationships, they were able to identify patterns in their own interpersonal relationships and comprehend the influence of their family history on their current relationships.

6.2.5 Homework Assignment

The client was instructed to complete the following tasks: (1) engage in 30 minutes of exercise daily, (2) read the book "To Know Yourself" (Zeng, 2018), and (3) maintain a psychological diary to explore daily negative emotions and irrational thoughts.

6.3 Action Phase (9-18 consultations)

6.3.1 Presenting issues

The client provided feedback indicating that they were aware of their issues, experienced an improvement in their mood, felt calmer, and possessed the determination to effect change. Although the client attempted to employ the "iceberg" theory to explore their emotions and cognitions, they had yet to fully master its methods. The client recognized issues in their relationships but lacked the knowledge necessary to address them.

6.3.2 Counseling Goals and Plans

The counseling objectives were to assist the client in recognizing their positive attributes, enhance their self-worth, facilitate the use of the iceberg theory to gain a deeper understanding of themselves, develop the ability to communicate consistently, and establish equitable and harmonious interpersonal relationships.

6.3.3 Counseling Process

Establishing a trusting and secure consultation relationship with the client facilitated the enhancement of their inner security. The client was guided to recognize their positive attributes, such as diligence, self-improvement, persistence, altruism, kindness, and enthusiasm, which encouraged a connection with their inner self and desires, ultimately empowering the client to improve their self-worth. Additionally, the client was assisted in understanding the motivations behind their stringent self-expectations and the desire for recognition from others, including love, acknowledgment, understanding, and respect. They were supported in learning to fulfill these desires through self-love, self-esteem, and autonomy. In the context of interpersonal relationships, sculpting techniques were utilized to help the client explore adaptive strategies for engaging with others. The client's internal emotions, cognitions, and expectations were examined, facilitating a connection with their aspirations and prompting the relinquishment of unreasonable expectations in favor of recognizing their own resources and

strengths. Through the use of empty chair techniques and role-playing, the client gained insight into the cognitions, emotions, and behaviors of various roles in interpersonal relationships, while also learning consistent communication and effective refusal methods to establish harmonious relationships.

6.3.4 Client's Progress

The client underwent a transformation in their perspective, relinquishing unreasonable beliefs, reducing their focus on external evaluations, releasing unrealistic expectations of others, connecting with their own inner resources, and acquiring the skill of self-care. Furthermore, the client adapted their approach to flattery in interpersonal relationships, learned to communicate consistently, and mastered the art of making reasonable refusals.

6.3.5 Homework Assignment

The homework assignment consisted of two components. Firstly, the client was instructed to read "Guided Meditations and Inspirations by Virginia Satir" (Banmen, 2022) and identify ten ways to appreciate themselves. Secondly, the client was directed to practice the principles of rejection and consistency in their daily life.

6.4 End Phase (19-20 Consultations)

6.4.1 Presenting issues

The client presented with a stable mental state. The scientific research had made periodic progress, and the client had successfully published several papers. Additionally, the client's relationship with their supervisor had significantly improved, and they reported having positive relationships with their classmates.

6.4.2 Counseling Goals and Plans

During the counseling sessions, the client's goals were to enhance their sense of self-worth, summarize the changes, gains, and growth they experienced throughout the consultation process, consolidate their growth and changes, and ultimately bring the counseling to a close.

6.4.3 Counseling Process

During the counseling process, the client was assisted in summarizing their growth and changes in cognition, emotions, and behaviors. They were encouraged to recognize their own efforts and growth, and the counselor discussed potential development directions for their future life and studies. The client's faith and confidence in facing future difficulties were also strengthened.

6.4.4 Client's Progress

The client exhibited a strong sense of hope for the future and actively engaged in their studies and personal life. Their emotions remained stable, and they demonstrated the ability to share their experiences and provide support to classmates experiencing emotional difficulties.

7. Evaluation of Counseling Effect

In this psychological crisis case, after 20 counseling sessions, the client experienced relief from the crisis, underwent a positive change in life attitude, enhanced self-worth, embraced self-acceptance, effectively managed emotions, and consistently expressed himself in interpersonal interactions. Subsequently, the client's social functioning was significantly restored, leading to a referral to a research group for ongoing observation. During a follow-up visit three months later, the client exhibited stable psychological well-being and a marked improvement in social functioning. A year later, the client demonstrated compliance with the doctor's advice to reduce medication, maintaining stable and positive psychological well-being as well as good social functioning.

7.1 The Client's Evaluation of the Counseling's Impact

The client reported a significant improvement in their psychological state, resulting in a positive and confident outlook on life. Moreover, they made smooth progress with their scientific research and experienced a marked enhancement in their relationships with both tutors and classmates.

7.2 The Consultant's Evaluation of the Counseling's Impact

Through observation and dialogue, it was evident that the counseling had successfully achieved its goals. The client's psychological crisis had been alleviated, leading to improved mood stability and a gradual reduction in medication under medical supervision. The client acquired the skills to lead a balanced life, rectified irrational thoughts, established a new value system, embraced self-acceptance and empathy, adapted their communication style, and strived for consistency. Furthermore, when faced with life changes, the client actively confronted challenges, assumed responsibility, made reasonable choices regarding unmet expectations and aspirations, and

learned to let go and adapt.

7.3 Others' Evaluation of the Client's Condition

Based on feedback from the tutor and peers, the client's mental well-being showed significant improvement. Furthermore, their scientific research made smooth progress, resulting in the publication of high-quality articles. The client demonstrated willingness to assist the research group and fostered harmonious interpersonal relationships.

8. Reflections and Revelations

This psychological crisis case yielded positive outcomes after 20 counseling sessions for two primary reasons. Initially, the consultant's timely and effective intervention addressed the client's psychological crisis, enabling prompt drug treatment and psychological consultation to stabilize the client's mental state. Additionally, the consultant established a strong trust relationship with the client and conducted precise and effective interventions to motivate the client for change, facilitating adjustment and transformation through effective counseling methods. Furthermore, three insights emerged in mental health education for graduate students:

8.1 Strengthen Life Education and Frustration Education of Graduate Students

During psychological crisis interventions, we discovered numerous cases of such crises among graduate students, primarily due to their need to adjust to novel learning and interpersonal models. However, given that graduate students are in the early stages of their adult life, their outlook on life and values may be considered immature. When confronted with increased pressure of scientific research, they often lacked the skills to communicate with authorities and were reluctant to seek timely assistance, leading to extreme thoughts and behaviors. Hence, mental health education for graduate students should not be overlooked, and universities and colleges should focus on mental health education, including life and frustration education, to enhance their world outlook, outlook on life, and values. In our lives, we encounter diverse experiences, and to cope with life's challenges, we must adopt flexible psychological strategies and learn to face life's injustices and grievances. It is essential to take a comprehensive and long-term approach to life's difficulties and setbacks and transform them into a positive force for personal growth.

8.2 Attach Importance to the Training of Mental Health Knowledge and Skills of Graduate Tutors

In this instance, the student's psychological crisis was triggered by academic pressure, a common challenge encountered by graduate students. Graduate supervisors bear the responsibility for the mental well-being of graduate students, yet the majority lack adequate understanding of mental health knowledge and skills. According to the China National Mental Health Development Report (2021-2022), the accurate identification rate of depression by teachers is only 29.7% (Luo, 2020). Numerous graduate supervisors are unable to offer psychological support to students and experience negative emotions, such as worry and fear, when dealing with students with psychological issues. Consequently, they adopt evasive attitudes and employ negative communication methods with students, hindering the development of the mentoring relationship and potentially exacerbating students' psychological issues. Therefore, within the realm of mental health education in higher education institutions, emphasis should be placed on enhancing the mental health knowledge and skills of graduate tutors, fostering their understanding of students' mental states in diverse situations, assisting graduate students in managing academic pressure rationally, and encouraging the adoption of positive and effective coping strategies.

8.3 Assist Graduate Students to Improve Their Mental Resilience

Numerous graduate students struggle to engage in effective psychological adjustment and resort to habitual or depressive coping mechanisms, such as sleeping, shopping, or overeating. When faced with excessive pressure, habitual coping mechanisms may prove ineffective in managing stress. Thus, mental health education should prioritize helping graduate students recognize the positive impact of emotional regulation and acquire diverse and effective techniques for regulating emotions, such as exercise, communication, and mindfulness. If self-regulation proves ineffective, students should be proactive in seeking assistance and accessing positive resources both within and beyond the school to overcome psychological challenges and bolster their psychological resilience.

8.4 Improve the Interpersonal Skills of Graduate Students

Each individual is a member of society, where we learn from and support one another, fulfilling our psychological need for belonging and value (Liu, 2019). Nevertheless, numerous graduate students prioritize scientific research and become accustomed to working independently, often fearing criticism and exposing their

weaknesses to others. Thus, it is imperative to encourage postgraduates to recognize the beneficial impact of interpersonal relationships on personal growth, acquire interpersonal skills, such as taking initiative, self-disclosure, empathy, cooperation, communication, and assertiveness, learn to seek support from individuals and groups, and offer timely assistance to those in need (Luo, 2020).

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